

# Olympic Ice Cream Co. Inc.

## “Marino’s Italian Ices”

129 -10 91<sup>st</sup> Avenue  
Richmond Hill, NY 11418

Phone 718-849-6200  
Fax 718-805-0455

Please Mail or Fax the Completed Form To The Address Above:

2010-2011 School Year

Attn: Marinos Italian Ices High Achievers Program


Program Dates: September 1, 2010 – June 30, 2011

Or Email: [HighAchievers@MarinosItalianIces.com](mailto:HighAchievers@MarinosItalianIces.com)

**All Materials Are Free!**

Website: [www.MarinosItalianIces.com](http://www.MarinosItalianIces.com)

Materials are available on a first come, first served basis. So please return your enrollment form as soon as possible.

<b>Your School Information</b>	Principle _____ School Name _____ Address _____ City _____ State _____ Zip _____ Phone (_____) _____ Fax (_____) _____ Ship To The Attention Of _____ E-mail _____			
<b>Your District Information</b> <small>(if applicable)</small>	Superintendent _____ District/Diocese _____ Address _____ City _____ State _____ Zip _____ Phone (_____) _____ Fax (_____) _____			
<b>Classroom Packet Quantity</b> <small>(K-6<sup>th</sup> grade)</small>	Each participating classroom needs one packet			
	Grade	Total # Classes **		Total # Students **
	K*			
	1			
	2			
	3			
	4			
	5			
	6			
	Resource/ Special Needs Rooms			
	<b>Total</b>			
* Morning and afternoon classes each need a packet ** Please estimate, if necessary, based on current classes/students.				



I'm a High Achiever Supporter! I agree the above named information to be correct to the best of my knowledge. I will support the High Achievers Program by distributing packets to the teachers and do my best to ensure the award certificates are used only to encourage students to achieve their goals set forth by the teachers and not sold or transferred in ways that are against the values of the program.

Authorized Signature \_\_\_\_\_ Title \_\_\_\_\_